

Valdez, De La O & Associates, Inc.

1300323-001

Ed Valdez

Multiple Line Insurance Adjusters and Investigators

Phone: 505-474-3681

Albert Valdez

P.O. Box 6207

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Santa Fe, New Mexico 87502

June 23, 2014

Mr. Rod Crawley
Claims Adjuster
Risk Management Division
P.O. Box 6850
Santa Fe, New Mexico 87502

RECEIVED

JUN 25 2014

Re: RMD Claim #: 1300323-001
Insured: NMDPS
Claimant: Jose Nick Romero
Date of Loss: 11-05-12
My File #: AC31684

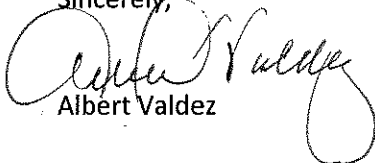
RISK MANAGEMENT DIVISION PAC

Dear Mr. Crawley:

ENCLOSURES: (1) Release of all claims and (2) Record of time and expenses.

Enclosed is the executed release I obtained from the claimant. Your check has been delivered to him. I am now closing my file. Thank you for this assignment.

Sincerely,


Albert Valdez



RELEASE OF ALL CLAIMS

That **JOSE NICK ROMERO** for and in consideration of the sum of **ONE THOUSAND, FOUR HUNDRED and 00/100 Dollars (\$1,400.00)**, the receipt and sufficiency of which is hereby acknowledged, does hereby remise, release and forever discharge the **NEW MEXICO DEPARTMENT OF PUBLIC SAFETY** and the **RISK MANAGEMENT DIVISION**, their successors and assigns, and/or his, her, their heirs, executors and administrators, and also any and all other persons, associations and corporations, whether herein named or referred to or not, and who, together with the above named, may be jointly or severally liable to the Undersigned, of and from any and all, and all manner of, actions and causes of action, rights, suits, covenants, contracts, agreements, judgments, claims and demands whatsoever in law or equity, including claims for contribution, arising from and by reason of any and all **KNOWN AND UNKNOWN, FORESEEN AND UNFORESEEN** bodily and personal injuries or death, damage to property, and the consequences thereof, which heretofore have been, and which hereafter may be sustained by the Undersigned or by any and all other persons, associations and corporations, whether herein named or referred to or not, and especially from all liability arising out of an occurrence that happened on or about the **5TH** day of **NOVEMBER, 2012** at or near **US 84 GUADALUPE COUNTY, NEW MEXICO**.

Further, in consideration of the above payment the **UNDERSIGNED ALSO EXPRESSLY DECLARES AND AGREES;**

- 1) That all claims, past, present or future, are disputed and this full and final settlement thereof shall never be treated as evidence of liability, nor as an admission of liability or responsibility at any time or in any manner whatsoever;
- 2) That this release covers and includes all claims several or otherwise, past, present or future, which can or may ever be asserted by any person or persons, as heirs, or otherwise, as the result of injuries or death and/or damages as aforesaid or the effects or consequences thereof;
- 3) That this full and final release shall cover and include all and any future injuries, death and/or damages not now known to any of the parties hereto but which may later develop or be discovered, including the effects or consequences thereof and including all causes of action therefore;
- 4) That the Undersigned will indemnify and hold harmless the said parties released hereby, against loss, including counsel fees, from any and every claim or demand of every kind and character, including claims for contribution, which may be asserted by the Undersigned by reason of said occurrence, injuries and/or damages or the effects of consequences thereof.
- 5) That those who are hereby released shall not be estopped or otherwise barred from asserting and expressly reserve the right to assert, any claim or cause of action they may have against the Undersigned or any others.

In witness whereof, the hand and seal of the Undersigned is set hereunto this day of 2013.

READ CAREFULLY BEFORE SIGNING

Witness: _____

Address: _____

Signature: X Nick

Address: 318 Capitan ave

Witness: _____

Signature: _____

Address: _____

Address: _____

STATE OF: _____

COUNTY OF: Guadalupe

On this 12th day of June, 2014, before me personally appeared to me personally known, and known to be the persons individually or jointly described in and who executed the above instrument and who acknowledged to me the act of signing and sealing thereof.
My term expires April 22, 2015

NOTARY PUBLIC

